

1.) CORPORATION NAME:

Insight PreProfessional Program

DUE DATE: **5/31/2011**

SCC ID NO: **06178644**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**OFFICER
KAREN WALKING-EAGLE
9904 COMMONWEALTH BLVD
FAIRFAX, VA 22032**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FAIRFAX COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9904 COMMONWEALTH BLVD

CITY/ST/ZIP: FAIRFAX, VA 22032-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: KAREN WALKING-EAGLE
TITLE: P/EXEC DIRECTOR
ADDRESS: 9904 COMMONWEALTH BLVD
CITY/ST/ZIP/CO: FAIRFAX, VA 22032-

OFFICER

DIRECTOR

NAME: DR BEVERLY PRINGLE
TITLE: TREASURER
ADDRESS: 232 11TH ST NE
CITY/ST/ZIP/CO: WASHINGTON, DC 20002-

OFFICER

DIRECTOR

NAME: MR MARK MORAN
TITLE: DIRECTOR
ADDRESS: 1330 CONNECTICUT AVENUE
CITY/ST/ZIP/CO: WASHINGTON, DC 20036-

OFFICER

DIRECTOR

NAME: SPIKE BIGHORN
TITLE: VICE PRESIDENT
ADDRESS: 901 D STREET SW
SUITE 910
CITY/ST/ZIP/CO: WASHINGTON, DC 20024-

OFFICER

DIRECTOR

NAME: LESLIE ANDERSON
TITLE: SECRETARY
ADDRESS: 1438 SPRING VALE AVENUE
CITY/ST/ZIP/CO: MCGEE, VA 22101-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ KAREN WALKING-EAGLE</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>KAREN WALKING-EAGLE, P/EXEC DIRECTOR</u> PRINTED NAME AND CORPORATE TITLE	<u>6/4/2011</u> DATE
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It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.